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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	10/626,069
Filing Date	July 24, 2003
First Named Inventor	Garret D. Cawthon
Art Unit	1617
Examiner Name	Kendra D. Carter
Attorney Docket Number	TOCC-7

Total Number of Pages in This Submission

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
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Remarks

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Krieg DeVault LLP		
Signature			
Printed name	Gregory B. Coy		
Date	July 18, 2007	Reg. No.	40,967

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

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Typed or printed name	Gregory B. Coy	Date	July 18, 2007

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re patent application of:)	
)	Before the Examiner
Garret D. Cawthon)	Kendra D. Carter
)	
Serial No. 10/626,069)	
)	Group Art Unit 1617
Filed July 24, 2003)	
)	
METHODS COMPOSITIONS AND)	
SYSTEMS FOR THE PREVENTION AND)	July 18, 2007
TREATMENT OF DIAPER RASH)	

RESPONSE TO OFFICE ACTION

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Nonfinal Office Action dated April 18, 2007, please consider the following. No fees are believed to be required for this submission, however, if any additional fees are deemed necessary, please charge said fees to Deposit Account No. 12-2424, but not to include the payment of any issue fee.

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Gregory B. Coy

Name of Registered Representative

Gregory B. Coy
Signature

July 18, 2007
Date of Signature